

<010>	Study Area Code	411818
<015>	Study Area Name	CRAW-KAN TEL COOP
<020>	Program Year	2017
<030>	Contact Name: Person USAC should contact with questions about this data	Brian Davied
<035>	Contact Telephone Number: Number of the person identified in data line <030>	6207248235 ext.
<039>	Contact Email Address: Email of the person identified in data line <030>	bdavied@ckt.net
Form Type		54.313 and 54.422

**(100) Service Quality Improvement Reporting  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	411818
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<039>	Contact Email Address - Email Address of person identified in data line <030>	bdavied@ckt.net

<110>	Has your company received its ETC certification from the FCC?	(yes / no )	<input type="radio"/> <input checked="" type="radio"/>
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no )	<input type="radio"/> <input type="radio"/>

If your answer to Line <111> is yes, please file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

411818ks112.pdf

Name of Attached Document

Please select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to §54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

- <113> Maps detailing progress towards meeting plan targets
- <114> Report how much universal service (USF) support was received
- <115> How much (USF) was used to improve service quality and how support was used to improve service quality
- <116> How much (USF) was used to improve service coverage and how support was used to improve service coverage
- <117> How much (USF) was used to improve service capacity and how support was used to improve service capacity
- <118> Provide an explanation of network improvement targets not met in the prior calendar year.

Yes
Yes
Yes
Yes
Yes
Not Applicable

***REDACTED - FOR PUBLIC INSPECTION***

**REDACTED**

**Pages &**

**[The Progress Report of Craw-Kan Telephone Cooperative, Inc. – KS 411818 Filed Pursuant to 47 C.F.R. § 54.313(a)(1) is redacted in its entirety as Highly Confidential Information]**

<210> For the prior calendar year, were there any reportable voice service outages? No

**(300) Unfulfilled Service Request  
Data Collection Form**

FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

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<039>	Contact Email Address - Email Address of person identified in data line <030>	bdavied@ckt.net

<300> Unfulfilled service request (voice)

0

<310> Detail on attempts (voice)

Name of Attached Document

<320> Unfulfilled service request (broadband)

0

<330> Detail on attempts (broadband)

Name of Attached Document

(400) Number of Complaints per 1,000 customers Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<039>	Contact Email Address - Email Address of person identified in data line <030>	bdavied@ckt.net
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize. <div>Offered both fixed and mobile voice</div>	
<410>	Complaints per 1000 customers for fixed voice	0 . 0
<420>	Complaints per 1000 customers for mobile voice	0 . 0
<430>	Select from the drop-down list to indicate how you would like to report end-user customer complaints (zero or greater) for broadband service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize. <div>Offered both fixed and mobile broadband</div>	
<440>	Complaints per 1000 customers for fixed broadband	0 . 0
<450>	Complaints per 1000 customers for mobile broadband	0 . 0

<b>(500) Compliance With Service Quality Standards and Consumer Protection Rules</b>		FCC Form 481
<b>Data Collection Form</b>		OMB Control No. 3060-0986/OMB Control No. 3060-0819
		July 2013
<010>	Study Area Code	411818
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<039>	Contact Email Address - Email Address of person identified in data line <030>	bdavied@ckt.net
<500>	Certify compliance with applicable service quality standards and consumer protection rules	Yes
		411818ks510.pdf
<510>	Descriptive document for Service Quality Standards & Consumer Protection Rules Compliance	

## **FCC Form 481 Certifications**

FCC Form 481 Line 510

Craw-Kan Telephone Cooperative, Inc.

SAC 411818

### **Line 510: Service Quality Standards & Consumer Protection Rules Compliance**

#### **Service Quality Standards**

Craw-Kan Telephone Cooperative Inc. complies with the service quality standards as adopted in the Kansas Corporation Commission (KCC) Docket Nos. 191,206-U and 95-GIMT-047-GIT.

#### **Consumer Protection Rules**

Craw-Kan Telephone Cooperative Inc. complies with the following consumer protection rules:

- FCC rules regarding verification of orders for telecommunications service as required of submitting carriers {47 CFR §64.1100}
- The FCC's Truth-in-Billing Requirements {47 CFR §64.2400}
- Billing practice standards as set out in KCC Docket No. 06-GIMT-187-GIT and subsequent billing practice standards approved by the KCC.
- All of the requirements of 47 C.F.R. § Part 64 Subpart U, Customer Proprietary Network Information and Federal Trade Commission 16 C.F.R. §681, Identity Theft Red Flags



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<039>	Contact Email Address - Email Address of person identified in data line <030>	bdavied@ckt.net
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	411818ks610.pdf

## **FCC Form 481 Certifications**

FCC Form 481 Line 610

Craw-Kan Telephone Cooperative, Inc.

SAC 411818

### **Line 610: Functionality in Emergency Situations**

- ~~At~~ Craw-Kan Telephone Cooperative, Inc. maintains a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations. {47 CFR §54.202(a)}
- Craw-Kan Telephone Cooperative, Inc. has made reasonable provisions to meet emergencies resulting from power failures; sudden and prolonged increases in traffic; staff shortages; and fire, storm, and acts of God.

[illegible]

**(700) Price Offerings including Voice Rate Data  
Data Collection Form**

FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

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<701>	Residential Local Service Charge Effective Date	1/1/2016
<702>	Single State-wide Residential Local Service Charge	

<703>

<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<b4>	<b5>	<c>
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fees
KS	Arcadia		FR	17.0	0.0	1.56	0.61	19.17
KS	Arma		FR	17.0	0.0	1.56	0.61	19.17
KS	Bartlett		FR	17.0	0.0	1.56	0.61	19.17
KS	Brazilton		FR	17.0	0.0	1.56	0.61	19.17
KS	Bronson		FR	17.0	0.0	1.56	0.61	19.17
KS	Cherokee		FR	17.0	0.0	1.56	0.61	19.17
KS	Colony		FR	17.0	0.0	1.56	0.61	19.17
KS	Columbus		FR	17.0	0.0	1.56	0.61	19.17
KS	Crestline		FR	17.0	0.0	1.56	0.61	19.17
KS	Devon		FR	17.0	0.0	1.56	0.61	19.17
KS	Edna		FR	17.0	0.0	1.56	0.61	19.17
KS	Farlington		FR	17.0	0.0	1.56	0.61	19.17
KS	Fulton		FR	17.0	0.0	1.56	0.61	19.17
KS	Galesburg		FR	17.0	0.0	1.56	0.61	19.17
KS	Girard		FR	17.0	0.0	1.56	0.61	19.17
KS	Hallowell		FR	17.0	0.0	1.56	0.61	19.17
KS	Hepler		FR	17.0	0.0	1.56	0.61	19.17
KS	Hiattville		FR	17.0	0.0	1.56	0.61	19.17
KS	Lawton		FR	17.0	0.0	1.56	0.61	19.17
KS	McCune		FR	17.0	0.0	1.56	0.61	19.17
KS	Mulberry		FR	17.0	0.0	1.56	0.61	19.17

<701>	Residential Local Service Charge Effective Date	1/1/2016
<702>	Single State-wide Residential Local Service Charge	

[illegible]

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[illegible]

**(710) Broadband Price Offerings  
Data Collection Form**

FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

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<711>	<a1>	<a2>	<b1>	<b2>	<c>	<d1>	<d2>	<d3>	<d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}
	KS	Arcadia	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Arcadia	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Arcadia	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	KS	Arma	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Arma	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Arma	70.0	0.0	70.0	1000.0	1000.0	0.0	Other, No Limit on Usage Allowed
	KS	Bartlett	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Bartlett	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Bartlett	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	KS	Brazilton	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Brazilton	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Brazilton	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	KS	Bronson	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Bronson	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Bronson	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	KS	Cherokee	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Cherokee	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Cherokee	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	KS	Colony	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Colony	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Colony	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed

**(710) Broadband Price Offerings  
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	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}
	KS	Coloumbus	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Columbus	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Columbus	70.0	0.0	70.0	1000.0	1000.0	0.0	Other, No Limit on Usage Allowed
	KS	Crestline	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Crestline	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Crestline	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	KS	Devon	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Devon	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Devon	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	KS	Edna	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Edna	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Edna	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	KS	Farlington	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Farlington	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Farlington	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	KS	Fulton	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Fulton	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Fulton	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	KS	Galesburg	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Galesburg	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Galesburg	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed



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	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}
	KS	Girard	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Girard	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Girard	70.0	0.0	70.0	1000.0	1000.0	0.0	Other, No Limit on Usage Allowed
	KS	Hallowell	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Hallowell	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Hallowell	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	KS	Hepler	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Hepler	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Hepler	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	KS	Hiattville	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Hiattville	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Hiattville	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	KS	Lawton	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Lawton	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Lawton	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	KS	McCune	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	McCune	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	McCune	70.0	0.0	70.0	1000.0	1000.0	0.0	Other, No Limit on Usage Allowed
	KS	Mulberry	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Mulberry	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Mulberry	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed

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	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}
	KS	Pleasanton	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Pleasanton	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Pleasanton	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	KS	Prescott	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Prescott	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Prescott	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	KS	Savonburg	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Savonburg	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Savonburg	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	OK	South Bartlett	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	OK	South Bartlett	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	OK	South Bartlett	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	OK	South Edna	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	OK	South Edna	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	OK	South Edna	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	KS	Uniontown	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Uniontown	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Uniontown	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed
	KS	Walnut	50.0	0.0	50.0	10.0	1.0	0.0	Other, No Limit on Usage Allowed
	KS	Walnut	60.0	0.0	60.0	50.0	15.0	0.0	Other, No Limit on Usage Allowed
	KS	Walnut	70.0	0.0	70.0	100.0	20.0	0.0	Other, No Limit on Usage Allowed

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<039>	Contact Email Address - Email Address of person identified in data line <030>	bdavied@ckt.net

20

<010>	Study Area Code	411818
<015>	Study Area Name	CRAW-KAN TEL COOP
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Brian Davied
<035>	Contact Telephone Number - Number of person identified in data line <030>	6207248235 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bdavied@ckt.net
<810>	Reporting Carrier	Craw-Kan Telephone Cooperative Inc.
<811>	Holding Company	Not Applicable
<812>	Operating Company	Craw-Kan Telephone Cooperative Inc.

[illegible]

<010>	Study Area Code	411818
<015>	Study Area Name	CRAW-KAN TEL COOP
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Brian Davied
<035>	Contact Telephone Number - Number of person identified in data line <030>	6207248235 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bdavied@ckt.net
<810>	Reporting Carrier	Craw-Kan Telephone Cooperative Inc.
<811>	Holding Company	Not Applicable
<812>	Operating Company	Craw-Kan Telephone Cooperative Inc.

[illegible]

**(900) Tribal Lands Reporting  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	411818
<015>	Study Area Name	CRAW-KAN TEL COOP
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Brian Davied
<035>	Contact Telephone Number - Number of person identified in data line <030>	6207248235 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bdavied@ckt.net

<900> Does the filing entity offer tribal land services? (Y/N) No

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select Yes or No or Not Applicable

**(1000) Voice and Broadband Service Rate Comparability  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	411818
<015>	Study Area Name	CRAW-KAN TEL COOP
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Brian Davied
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<039>	Contact Email Address - Email Address of person identified in data line <030>	bdavied@ckt.net

<1000> Voice services rate comparability certification Yes

<1010> Attach detailed description for voice services rate comparability compliance 411818ks1010.pdf

Name of Attached Document

<1020> Broadband comparability certification Yes - Pricing is no more than the most recent applicable benchmark announced by the Wireline Competition Bureau

<1030> Attach detailed description for broadband comparability compliance

Name of Attached Document

## **FCC Form 481 Certifications**

FCC Form 481 Lines 1010

Craw-Kan Telephone Cooperative, Inc.

SAC 411818

### **Line 1010: §54.313 (a) (10) – Pricing of Voice Services**

**Certification that the residential voice rate is below the Voice Comparability Rate benchmark of \$46.96.**

The company's retail monthly residential local service rate is \$19.17 in all Exchanges.



**(1100) No Terrestrial Backhaul Reporting  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	411818
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<020>	Program Year	2017
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<039>	Contact Email Address - Email Address of person identified in data line <030>	bdavied@ckt.net

<1100> Certify whether terrestrial backhaul options exist (Y/N)

Yes

<1130> Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).

**(1200) Terms and Condition for Lifeline Customers**  
**Lifeline**  
**Data Collection Form**

FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

<010>	Study Area Code	411818
<015>	Study Area Name	CRAW-KAN TEL COOP
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Brian Davied
<035>	Contact Telephone Number - Number of person identified in data line <030>	6207248235 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bdavied@ckt.net

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

411818ks1210.pdf

Name of Attached Document

<1220> Link to Public Website

HTTP <http://ckt.net/service/telephone/>

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

- |        |   |                                     |
|--------|---|-------------------------------------|
| <1221> | Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, | <input checked="" type="checkbox"/> |
| <1222> | Details on the number of minutes provided as part of the plan,  | <input checked="" type="checkbox"/> |
| <1223> | Additional charges for toll calls, and rates for each such plan.  | <input checked="" type="checkbox"/> |

## **FCC Form 481 Certifications**

FCC Form 481 Line 1210

Craw-Kan Telephone Cooperative, Inc.

SAC 411818

### **Line 1210: Lifeline Terms and Conditions**

Lifeline subscribers receive unlimited local calling at a discount of \$9.25.

# KANSAS LIFELINE PROGRAM

*Save up to  
**\$17.02 off** your  
telephone bill!*

You may be eligible to receive up to **\$17.02 off** your monthly local telephone bill through the *Lifeline Program*.

## ***You are eligible if you receive any of the following:***

Supplemental Nutrition Assistance Program, General Assistance, Bureau of Indian Affairs General Assistance, Temporary Assistance for Needy Families, Tribally Administered Temporary Assistance for Needy Families, Medicaid, Supplemental Security Income (SSI), Head Start (tribal programs for only those meeting its income qualifying standard), Free School Lunch Program, Tribally Administered Free School Lunch Program, Food Distribution Program, Low Income Energy Assistance Program (LIEAP), Section 8 Public Housing Assistance, Food Distribution Program on Tribal Lands, or 150% of the federal poverty level\*. A consumer must provide **THREE CONSECUTIVE MONTHS** of statements as documentation of income, or provide a copy of his or her tax return for the previous year.

For more information about *Kansas Lifeline*, call your **local** telephone company. The number is on your telephone bill or in the front part of the telephone directory.

## **\*2016 Kansas Poverty Level Guidelines**

Number In Household	Maximum Annual Income
1	\$17,820
2	\$24,030
3	\$30,240
4	\$36,450
5	\$42,660
6	\$48,870
7	\$55,095
8	\$61,335
Each additional person in household	\$ 6,240

*The Kansas Lifeline program is 150% of the 2016 federal poverty level.*



R. LOCAL OPERATOR ASSISTANCE SERVICE (Continued)

(2) Local calls from mobile stations.

3. Rates

Description	Service Charge Rate per message
a. Dialing calling card Station-to-Station	\$ 2.10
b. Operator Station-to-Station	\$ 2.50
c. Operator Person-to-Person	\$ 3.65
d. Line Status Verification	\$ 2.00
e. Busy Interrupt	\$ 3.00

S. KANSAS LIFELINE SERVICE PROGRAM

The Lifeline Service Program (Lifeline), sponsored by the FCC, is a program designed to maintain and preserve universal service by providing a reduction in the price of basic residential exchange service to qualifying low-income customers.

a. General

1. Lifeline is a federally funded reduction of basic local service of \$9.25 per month. (CR)
  - (a) Lifeline customers will also receive additional Lifeline Service reductions in intrastate local service of \$7.77. (CR)
2. Local service for Lifeline customers may not be disconnected for nonpayment of toll charges.
  - (a) Toll Restriction Service will be provided to Lifeline customers at no charge.
  - (b) Lifeline customers are not required to accept Toll Restriction Service as a condition to avoid disconnection of local service for non-payment of toll.
  - (c) Lifeline customers are not required to pay a deposit in order to obtain local service if the customer voluntarily elects installation of Toll Restriction Service.
3. Partial payments from Lifeline customers will be applied first to local service charges and then to toll charges.
4. Lifeline customers will not be denied re-establishment of service on the basis that the customer was previously disconnected for non-payment of toll charges.
5. Lifeline will not be furnished on a Foreign Exchange service arrangement.

ISSUED: March 14, 2012

EFFECTIVE:

By: Craig Wilbert, General Manager  
Craw-Kan Telephone Cooperative, Inc.  
Girard, Kansas

S. KANSAS LIFELINE SERVICE PROGRAM (Continued)

b. Eligibility Requirements

1. Lifeline will be provided for one (1) telephone line per household, at the customer's principal place of residence who have only one local exchange access line to his/her residential premises or dwelling place.\* Verification of this requirement will be through self-certification.
2. Show that he/she is currently a recipient of benefits from one of the following public assistance programs:
  - Section 8 Housing (T)
  - LIEAP Low Income Energy Assistance Program (T)
  - Temporary Assistance for Needy Families (TAF)
  - Supplemental Nutrition Assistance Program (T)
  - Medicaid
  - National School Lunch Program Free Lunch
  - Supplemental Security Income (SSI)
  - General Assistance
  - Food Distribution Program (United Tribes)
  - Individuals living on tribal land receiving:
    - Bureau of Indian Affairs general assistance
    - Tribally-administered Temporary Assistance for Needy Families (TAF)
    - Head Start Program benefits
    - National School Lunch Program free lunch

Individuals choosing this option must obtain and provide to the Telephone Company a copy of a valid identification card or the appropriate documents that are issued to them by the agency administering the program.

c. Income Eligibility

A customer shall be eligible for the Lifeline Service Program if that customer's household annual income level is at or below 150% of the federal poverty level. Such customers may obtain a form from the Telephone Company suitable for self-certification of income level and provide the completed form to the Company to begin service under the program. Proof of income is required. Acceptable documentation may include the prior year's federal, state, or tribal tax return, or other forms of income certification. Customers should contact the Company for specific details.

\*A residential premises or dwelling place is that location where a customer resides, even if such residential premises or dwelling place is only a single room. Lifeline will not be provided if the customer has access to other local exchange telephone service within the residential premises or dwelling place, provided/owned by himself/herself or owned/provided by others. If, however, it can be determined by the Telephone Company that access to other existing local exchange telephone service owned/provided by others is virtually denied, or is inaccessible to the customer, then Lifeline Service will be provided.

ISSUED: March 14, 2012

EFFECTIVE:

By: Craig Wilbert, General Manager  
Craw-Kan Telephone Cooperative, Inc.  
Girard, Kansas

**(2000) Price Cap Carrier Additional Documentation**

**Data Collection Form**

*Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers*

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	411818
<015>	Study Area Name	CRAW-KAN TEL COOP
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Brian Davied
<035>	Contact Telephone Number - Number of person identified in data line <030>	6207248235 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bdavied@ckt.net

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

**Incremental Connect America Phase I reporting**

- <2010> 2nd Year Certification 47 CFR § 54.313(b)(1)(i) - Note that for the July 1 2016 certification, this applies to Round 2 recipients of Incremental Support
- <2011> 3rd Year Certification 47 CFR § 54.313(b)(1)(ii) - Note that for the July 1 2016 certification, this applies to Round 1 recipients of Incremental Support
- <2022> Recipient certifies, representing year two after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for projects that will provide broadband with speeds of at least 4 Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only.
- <2023> The attachment on line 2024 includes a statement of the total amount of capital funding expended in the previous year in meeting Connect America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers year two - 54.313(b)(2)(ii). Round 2 recipients only.
- <2024A> Round 2 Recipient of Incremental Support?
- <2024B> Attach list of census blocks indicating where funding was spent in year two - 54.313(b)(2)(ii). Round 2 recipients only.
- <2025A> Round 1 or Round 2 Recipient of Incremental Support?
- <2025B> Attach geocoded Information for Phase I milestone reports (Round 1 for year three and Round 2 for year two) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13-
- <2015> 2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)






Name of Attached Document Listing  
Required Information

Name of Attached Document Listing  
Required Information

**(2000) Price Cap Carrier Additional Documentation (Continued)**

**Data Collection Form**

*Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers*

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

**Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}**

<2016> Certification support used to build broadband

**Connect America Phase II Reporting {47 CFR § 54.313(e)}**

<2017A> Connect America Fund Phase II recipient?

<2017B> Attach information for Phase II - 54.313(e)(1) - list of geocoded locations already meeting the 54.309 public interest obligations at the end of calendar year 2015 and total amount of Phase II support, if any, the price

Name of Attached Document Listing  
Required Information

cap carrier used for capital expenditures in 2015.

<2018> Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(2)(ii)

Name of Attached Document Listing  
Required Information

<2019> Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(2)(v)

<2020> Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 40% of its supported locations in the state on December 31, 2017 - 54.313(e)(3)

<2021> Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 60% of its supported locations in the state on December 31, 2018 - 54.313(e)(4)

<2026> Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 80% of its supported locations in the state on December 31, 2019 - 54.313(e)(5)

<2027> Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 100% of its supported locations in the state on December 31, 2020 - 54.313(e)(6)



**(3005) Rate Of Return Carrier Additional Documentation  
Data Collection Form**FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

<010>	Study Area Code	411818
<015>	Study Area Name	CRAW-KAN TEL COOP
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Brian Davied
<035>	Contact Telephone Number - Number of person identified in data line <030>	6207248235 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bdavied@ckt.net

Complete the items below to note compliance with five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)	Yes - Attach Certification	
(3010A)	Milestone Certification {47 CFR § 54.313(f)(1)(i)}	411818ks3010b.pdf	
(3010B)	Please Provide Attachment	Name of Attached Document Listing Required Information	
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	No - No New Community Anchors	
(3012B)	Please Provide Attachment	Name of Attached Document Listing Required Information	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	<input checked="" type="radio"/> <input type="radio"/>
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	<input type="radio"/> <input checked="" type="radio"/>
Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:			
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		<input type="checkbox"/>
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		<input type="checkbox"/>
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Document Listing Required Information	
(3018)	If the response is no on line 3014, is your company audited?	(Yes/No)	<input checked="" type="radio"/> <input type="radio"/>
If the response is yes on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:			
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers		<input checked="" type="checkbox"/>
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows		<input checked="" type="checkbox"/>
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit.		<input checked="" type="checkbox"/>
If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:			
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers		<input type="checkbox"/>
(3023)	Underlying information subjected to a review by an independent certified public accountant		<input type="checkbox"/>
(3024)	Underlying information subjected to an officer certification.		<input type="checkbox"/>
(3025)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows		<input type="checkbox"/>
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	411818ks3026.pdf

# Craw-Kan



200 N. Ozark • Girard, KS 66743 • 620.724.8235 • fax: 620.724.4099

## MILESTONE CERTIFICATION

June 23, 2016

Marlene H. Dortch, Secretary  
Federal Communications Commission  
Office of the Secretary  
445 12<sup>th</sup> Street SW  
Room TW-A325  
Washington, D.C. 20554

**Re: Form 481 Line 3010 - Milestone Certification Pursuant to 47 C.F.R. § 54.313(f)(1)(i)**

Dear Ms. Dortch:

Craw-Kan Telephone Cooperative Inc., Study Area Code 411818, in accordance with 47 C.F.R. § 54.313(f)(1)(i) of the Commission's rules, hereby certifies that it is taking reasonable steps to provide upon reasonable request broadband service at actual speeds of at least 4 Mbps downstream/1 Mbps upstream, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas and that requests for such service are met within a reasonable amount of time.

Respectfully submitted,

**Craig R. Wilbert**  
**General Manager**

**FCC Form 481 Certifications**  
**FCC Form 481 Line 3012**  
**Craw-Kan Telephone Cooperative, Inc. SAC 411818**

**Community Anchor Institutions Newly Receiving Broadband in 2015**

There were no community anchor institutions who newly gained access to fixed broadband service during the calendar year 2015.

***REDACTED - FOR PUBLIC INSPECTION***

**REDACTED**

**Pages 3 -**

**[The Financial Statement of Craw-Kan Telephone Cooperative, Inc. –  
KS 411818 filed pursuant to 47 C.F.R. § 54.313(f)(2) is redacted in its  
entirety as Highly Confidential Information]**

***REDACTED - FOR PUBLIC INSPECTION***

**REDACTED**

**Page 5**

**[The Financial Data Summary (FCC Form 481;Lines 3027-3034) of  
Craw-Kan Telephone Cooperative, Inc. - KS 411818 filed pursuant to  
47 C.F.R. § 54.313(f)(2) is redacted in its entirety as Highly Confidential  
Information]**

<b>(4005) Rural Broadband Experiment Additional Documentation</b> <b>Data Collection Form</b>	<b>FCC Form 481</b> <b>OMB Control No. 3060-0986/OMB Control No. 3060-0819</b> <b>July 2013</b>
--	---

<010>	Study Area Code	411818
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**4005 Rural Broadband Experiment**

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

**Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)**

Please address Line 4001 regarding compliance with the Commission’s public interest obligations. All RBE participants must provide a response to Line 4001.

**4001.** Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

**Community Anchor Institutions – FCC 14-98 (paragraph 79)**

**4003a.** RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

**If yes to 4003A, please provide a response for 4003B.**

<b>4003b.</b> Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.	Name of Attached Document Listing Required Information	<div></div>
---	--	-------------

**Broadband Deployment Locations – FCC 14-98 (paragraph 80)**

<b>4004a.</b> Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.	Name of Attached Document Listing Required Information	<div></div>
--	--	-------------

<b>4004b.</b> Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband speed and data usage allowances available in the relevant geographic area.	Name of Attached Document Listing Required Information	<div></div>
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<b>Certification - Reporting Carrier Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
---	--

<010> Study Area Code	411818
<015> Study Area Name	CRAW-KAN TEL COOP
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**TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:**

<b>Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients</b>	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier: CRAW-KAN TEL COOP	
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/24/2016
Printed name of Authorized Officer: Craig Wilbert	
Title or position of Authorized Officer: General Manager	
Telephone number of Authorized Officer: 6206871893 ext.	
Study Area Code of Reporting Carrier: 411818	Filing Due Date for this form: 07/01/2016
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

<b>Certification - Agent / Carrier Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
---	--

<010> Study Area Code	411818
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<039> Contact Email Address - Email Address of person identified in data line <030>	bdavied@ckt.net

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:**

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) _____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

**TO BE COMPLETED BY THE AUTHORIZED AGENT:**

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier:	
Name of Authorized Agent Firm:	
Signature of Authorized Agent or Employee of Agent:	Date:
Name of Authorized Agent Employee:	
Title or position of Authorized Agent or Employee of Agent:	
Telephone number of Authorized Agent or Employee of Agent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	



## Attachments